

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215505000					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: SalonCentric Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street</p> <p>RICHMOND, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: NV</p> </div> <div style="width: 35%;"> <p>DUE DATE: 3/31/2015</p> <p>SCC ID NO: F1740267</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,500</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,500	
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COMMON	1,500						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 50 CONNELL DRIVE</p> <p style="margin-left: 40px;">CITY/ST/ZIP: BERKELEY HEIGHTS, NJ 07922</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: PAUL SHARNSKY TITLE: PRESIDENT ADDRESS: 565 FIFTH AVE. CITY/ST/ZIP/CO: NEW YORK, NY 10017 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: PAUL SHARNSKY TITLE: PRESIDENT ADDRESS: 565 FIFTH AVE. CITY/ST/ZIP/CO: NEW YORK, NY 10017	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROY RABINOWITZ SVP FIN/ASST S 50 CONNELL DRIVE BERKELEY HEIGHTS, NJ 07922	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTHONY ELVEDT TREASURER 50 CONNELL DRIVE BERKELEY HEIGHTS, NJ 07922	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FREDERIC ROZE CHAIR/CEO 575 FIFTH AVE NEW YORK, NY 10017	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALEJANDRO LOPEZ SVP & GEN MAN 575 FIFTH AVE. NEW YORK, NY 10017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH NUNZIATO SVP FINANCE 50 CONNELL DRIVE BERKELEY HEIGHTS, NJ 07922	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALEXANDRE PAGLIANO SVP & CFO 575 FIFTH AVE. NEW YORK, NY 10017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY WILKINSON EXVP OPERATIONS 8031 114TH AVE N LARGO, FL 33773	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ROY RABINOWITZ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROY RABINOWITZ, SVP FIN/ASST S PRINTED NAME AND CORPORATE TITLE	2/5/2015 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			